Child Count of Parentally Enrolled IDEA-Eligible Students Attending Elementary and Secondary Private Schools Within School District Boundaries

In accordance with IDEA 2004, every public school district must conduct a child count of <u>all</u> IDEA-eligible students who are parentally enrolled in private schools within the public school district's boundaries. This count must include all IDEA eligible students whether or not they are receiving special education services through a Services Plan. The child count for these students must be conducted on December 1, 2005. A copy of this count must be maintained by the public school, or the special education cooperative on behalf of its member school districts. A copy of this private school child count report will be required to be submitted when applications are made for IDEA Part B funds in the spring of 2006. The Private School Child Count Form is the basis for calculating the proportionate share of Part B funds for the 2006-2007 school year.

For questions regarding this child count or questions related to the completion of the form, please call Marilyn Pearson at 406-444-4428.

Count of Private/Non Public School Students who are IDEA Eligible
Count Date: December 1, 2005

**This form is to be used by School Districts to keep a record of students,
in accordance with 20 United States Code Sec. 1412(a)(10)(A)(i)(V),
that the school district has identified as IDEA eligible,
and who are parentally enrolled in private/non-public schools**

School District _____

See defintions of data elements on the next page.

LE _____

INITIALS F M L	BIRTHDATE M D Y	GENDER (M/F)	RACE/ ETHNICITY	GRADE	LEP ✓	SERVICES PLAN ✓	LIST OF DISABILITY ABBREVIATIONS	NAME OF PRIVATE SCHOOL

Completed By: _____ **Phone:** _____

DATA ELEMENTS

Initials: Three initials must be entered for each student (first, middle and last). If a student does not have a middle name/initial or the middle initial is unknown, use "X" for the middle initial. Initials may be entered either in upper or lower case.

Birth Date: Use the format of mm/dd/yyyy.

Gender: M – Male; F – Female

Race/Ethnicity: Use one of the following codes to indicate the race/ethnicity of each student (see definitions below). If race/ethnicity is unknown, enter the code that most closely appears to be correct.
01 American Indian or Alaskan Native   A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community recognition.
02 Asian   A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
03 Hispanic   A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture of origin, regardless of race.
04 Black (not Hispanic)   A person having origins in any of the Black racial groups of Africa.
05 White (not Hispanic)   A person having origins in any of the original peoples of Europe, North Africa or the Middle East.
06 Native Hawiian or Pacific Islander   A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

Grade: Enter the student's current grade by number or letter (example, pre-kindergarten [3 and 4-year-old students] = "PK"; kindergarten = "K"; first grade = "1"; etc.)

LEP (**Limited English Proficient):** If the student is limited English proficient, this box must be checked. An individual is LEP if the individual:
A. is aged 3 through 22;
B. is enrolled or preparing to enroll in an elementary or secondary school;
C. (i) was not born in the United States or whose native language is a language other than English;
   (ii) (I) is an American Indian or Alaskan Native, or a native of the outlying areas; and
      (II) comes from an environment where a language other than English has had a significant impact on the individual's
         level of English language proficiency; or
   (iii) is migratory, whose native language is a language other than English, and who comes from an environment where a
      language other than English is dominant; and
D. whose difficulties in speaking, reading, writing, or understanding the English language may be sufficient to deny the
 individual
   (i) the ability to meet the State's proficient level of achievement on State assessments described in section 111(b)(3);
   (ii) the ability to successfully achieve in classrooms where the language of instruction is English; or
   (iii) the opportunity to participate fully in our society.

Services Plan: If the student is being provided special education and/or related services by the public school in accordance with a services plan, check this box.

List of Disability Abbreviations: Enter the two-letter code for each of a student's identified disabilities according to the student's Child Study Team (CST) report.

AU Autism	HI Hearing Impairment
CD Cognitive Delay	LD Learning Disability
CW Child With Disabilities	OH Other Health Impairment
DB Deaf-Blindness	OI Orthopedic Impairment
DD Developmental Delay	SL Speech/Language Impairment
DE Deafness	TB Traumatic Brain Injury
ED Emotional Disturbance	VI Visual Impairment

Name of Private School: Enter name of the private/non-public school the student is enrolled in.